

SERIAL NUMBER 09/303,368	FILING DATE 04/30/99	CLASS 705/28	GROUP ART UNIT 2765 2765 3627	ATTORNEY DOCKET NO. BU9-99-021
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APPLICANT
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SOUTH BURLINGTON, VT; BALASUBRAMANIAN GOPALAN, SOUTH BURLINGTON, VT;
RAHUL JINDANI, SOUTH BURLINGTON, VT; JINRAJ DHRUVAKUMAR JOSHIPURA,
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MICHEL, ST-HUBERT, CANADA; PENNY JEANNETTE PEACHEY-KOUNTZ,
SOUTH BURLINGTON, VT; JAMES DONALD SCOTT, CHARLOTTE, NC.

CONTINUING DOMESTIC DATA***

VERIFIED

JE

(None)

371 (NAT'L STAGE) DATA***

VERIFIED

JE

(None)

FOREIGN APPLICATIONS***

VERIFIED

JE

(None)

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 05/19/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NC	SHEETS DRAWING 8	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Initials <u>JE</u> Initials _____					

ADDRESS
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~~SUITE 900~~
~~RESTON VA 20191~~ McLean, VA 22102-4231

TITLE
PRE-PROCESSOR FOR INBOUND SALES ORDER REQUESTS WITH LINK TO A THIRD
PARTY AVAILABLE TO PROMISE (ATP) SYSTEM

FILING FEE RECEIVED \$832	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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BIBDATA SHEET

CONFIRMATION NO. 8261

Bib Data Sheet

SERIAL NUMBER 09/303,368	FILING DATE 04/30/1999 RULE	CLASS 705	GROUP ART UNIT 3627	ATTORNEY DOCKET NO. BU9-99-021
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APPLICANTS

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 PENNY JEANNETTE PEACHEY-KOUNTZ, SOUTH BURLINGTON, VT;
 JAMES DONALD SCOTT, CHARLOTTE, NC;

** CONTINUING DATA *****

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** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/19/1999

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature _____ Initials _____	NC	8	24	3

ADDRESS

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 22102-4215

TITLE

PRE-PROCESSOR FOR INBOUND SALES ORDER REQUESTS WITH LINK TO A THIRD PARTY AVAILABLE

TO PROMISE (ATP) SYSTEM

<p>FILING FEE RECEIVED 832</p>	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<p><input type="checkbox"/> All Fees</p> <p><input type="checkbox"/> 1.16 Fees (Filing)</p> <p><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</p> <p><input type="checkbox"/> 1.18 Fees (Issue)</p> <p><input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Credit</p>
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